

"Express Mail" mailing label number EV314842392US

Date of Deposit: November 4, 2003



TRANSMITTAL LETTER			Case No. 659/691 (16,056)
Serial No. 09/659,307	Filing Date September 12, 2000	Examiner Rivera	Group Art Unit 3654
Inventor(s) Newman et al.			
Title of Invention Mounting System for a Wet Wipes Dispenser			

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is Petition and Fee for Extension of Time (in dup.); \$310.00 check for 2 month extension of time (1st month already paid); Notice of Appeal from the Examiner to the Board of Patent Appeals and Interferences (in dup.); \$330.00 check for Notice of Appeal Fee; and return postcard.

- ☐ Small entity status of this application under 37 CFR § 1.27 has been established by verified statement previously submitted.
- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ Petition for a 2 month extension of time.
- ☐ No additional fee is required.
- ☐ The fee has been calculated as shown below:

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GROUP 3600

					Small Entity		or	Other Than Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee		Rate	Add'l Fee
Total		Minus			x \$9=			x \$18=	
Indep.		Minus			x 43=			x \$86=	
First Presentation of Multiple Dep. Claim					+\$145=			+\$290=	
					Total add'l fee	\$		Total add'l fee	\$

- ☐ Please charge Deposit Account No. 23-1925 (BRINKS HOFER GILSON & LIONE) in the amount of \$_____. A duplicate copy of this sheet is enclosed.
- ☒ Checks in the amount of \$310.00 to cover the petition for extension fee, and \$330.00 to cover the Notice of Appeal fee are enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this communication or credit any overpayment to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.
- ☒ I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Amanda Church

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